

Without question, this demonstrates that Liu's needle is not a catheter.

In addition, while the Examiner admitted that "Liu [] and Davidson in combination is silent to a cap coupled to the guidewire/intervention device," (Office Action at 2), the Examiner concluded:

It would have been obvious to one of ordinary skill in the art to modify the device of Liu [] in view of Davidson with a cap as taught by Fischell [] in order to provide a handle or sealing end to prevent contamination or leaking of fluids at the proximal end. (Id. at 3.)

However, without conceding that such an interpretation of Liu is appropriate, to the extent that Liu's second entry 4 can be interpreted as being a side arm, Liu discloses that his second entry:

has a one-way valve (5), such as a flap valve, which prevents backup of fluids such as blood through said second entry. (Liu col. 3, lines 15-17.)

Liu further discloses that his second entry:

... is divided by a valve (5) so that fluid (blood) flowing through the needle and common passage can not escape through the distal entry of the arm. Though the valve prevents flow of blood back through distal end of the arm, it will allow a guide wire to enter into the lumen of the needle already in place in the blood vessel. (Id. col. 2, lines 53-59.)

In addition, Liu discloses:

Using the device as taught, it is possible to minimize exposure to both the patient and the care-giver to infections. (Id. 4, lines 7-9.)

Thus, after reading Liu, one skilled in the art would not have been motivated to modify Liu's device by adding a cap to his second entry "to prevent contamination or leaking of fluids at the proximal end."

Thus, none of Liu, Davidson and Fischell, alone or in combination, discloses or suggests the subject matter covered by claims 1-26. There is no suggestion to combine these references to provide this subject matter, and, even if the references were combined, the result would not be the subject matter covered by claims 1-26. Thus, Applicant requests reconsideration and withdrawal of the rejections of claims 1-26 under 35 U.S.C. § 103(a) as being unpatentable over Liu in view of Davidson and further in view of Fischell.

The Examiner also rejected claims 1-26 under 35 U.S.C. § 103(a) as being unpatentable over Liu in view of Davidson, and further in view of U.S. Patent No. 5,357,961 ("Fields"). However, as noted above, contrary to the Examiner's characterization, Liu does not disclose the catheter/side-arm tube combination required by claims 1-26. None of Liu, Davidson and Fields, alone or in combination, discloses or suggests the subject matter covered by claims 1-26. There is no suggestion to combine these references to provide this subject matter, and, even if the references were combined, the result would not be the subject matter covered by claims 1-26. Applicants therefore request reconsideration and withdrawal of the rejection of claims 1-26 under 35 U.S.C. § 103(a) as being unpatentable over Liu in view of Davidson and further in view of Fields.

Applicant believes the application is in condition for allowance with action is requested.

Please apply any charges or credits to deposit account 06-1050.

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Respectfully submitted,



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